FORM D UNITED STATES 3235-0076 SECURITIES AND EXCHANGE COMMISSION OMB Number: Washington, D.C. 20549 Expires: April 30, 2008 Estimated average burden FORM D hours per response... 16.00 SEC USE ONLY **2NOTICE OF SALE OF SECURITIES** Prefix Serial PURSUANT TO REGULATION D, **SECTION 4(6), AND/OR** DATE RECEIVED UNITORM LIMITED OFFERING EXEMPTION Name of Offering (check if his is an amendment and name has changed, and indicate change.) Gold Resource Corporation 2007 Private Placement Filing Under (Check box(es) that apply): ☐ Rule 504 ☐ Rule 505 ☐ Rule 506 Section 4(6) Type of Filing: New Filing ☐ Amendment BASIC IDENTIFICATION DATA Enter the information requested about the issuer Name of Issuer (check if this is an amendment and name has changed, and indicate change.) **Gold Resource Corporation** (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) Address of Executive Offices 222 Milwaukee Street, Suite 301, Denver, CO 80206 303-320-7708 Telephone Numb Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices) Oaxaca, Mexico Brief Description of Business Gold and precious metals exploration and development Type of Business Organization THOMSON other (please specify): Corporation ☐ limited partnership, already formed FINANCIA business trust limited partnership, to be formed

■ Estimated

GENERAL INSTRUCTIONS

Actual or Estimated Date of Incorporation or Organization:

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

CN for Canada; FN for other foreign jurisdiction)

Month

08

Year

98

CO

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

{00339822.1}

SEC 1972 (6-02)

A. BASIC IDENTIFICATION DATA 2. Enter the information requested for the following: | Fight | Property | Charles | Charles | Enter the property | Enter the property

- Each promoter of the issuer, if the issuer has been organized within the past five years;
- Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
- Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and

Each general and managing partner of partnership issuers.	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General Ge	eneral and/or Managing Partner
Full Name (Last name first, if individual) Reid, William W.	
Business or Residence Address (Number and Street, City, State, Zip Code) 222 Milwaukee Street, Suite 301, Denver, CO 80206	
Check Box(es) that Apply: ☐ Promoter ☒ Beneficial Owner ☒ Executive Officer ☒ Director ☐ Gen	neral and/or Managing Partner
Full Name (Last name first, if individual) Reid, David C.	
Business or Residence Address (Number and Street, City, State, Zip Code) 222 Milwaukee Street, Suite 301, Denver, CO 80206	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director Gen	neral and/or Managing Partner
Full Name (Last name first, if individual) Conrad, Bill M.	
Business or Residence Address (Number and Street, City, State, Zip Code) 5525 Erindale Drive, Suite 201, Colorado Springs, CO 80918	
	meral and/or Managing Partner
Full Name (Last name first, if individual) Jennings, Frank L.	
Business or Residence Address (Number and Street, City, State, Zip Code) 500 Kimbark Street, Suite 101, Longmont, CO 80501	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director Gen	neral and/or Managing Partner
Full Name (Last name first, if individual) Reid, Beth	
Business or Residence Address (Number and Street, City, State, Zip Code) 25 Downing Street, #1-501, Denver, CO 80218	
	neral and/or Managing Partner
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
	neral and/or Managing Partner
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
	neral and/or Managing Partner
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
	neral and/or Managing Partner
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
	neral and/or Managing Partner
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
	neral and/or Managing Partner
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)	
· · · · · · · · · · · · · · · · · · ·	

			• •	В.	INFOR	MATION	ABOUT ()FFERIN	G				
1.	Has the iss	er sold, or do	es the issuer	intend to sel	l to non-ac	credited inv	estors in th	is offering?				Yes	No ⊠
••	1143 1110 1301	o. 501a, 01 a0		wer also in A								_	_
2.	What is the	minimum inv	estment that	will be acce	pted from a	any individu	al?		***************************************			\$ 25,000	D
3.	Does the offe	ring permit joi	nt ownership o	f a single unit	?	1421-21-224-11-111		***************************************			*********	Yes ⊠	No □
4.		ormation reques											
	commission offering. If and/or with	or similar remains person to be state or states rsons of such a	meration for s listed is an ass , list the name	olicitation of ociated persor of the broker	purchasers n or agent o or dealer.	in connection of a broker or If more than	with sales of dealer regist five (5) perso	of securities in ered with the ons to be liste	n the SEC ed are				
	Name (Last i eline Pacific,	ame first, if i	ndividual)										
Busii	ness or Resid	ence Address				p Code)							
655 ! Nam	Montgomer e of Associa	Street, Suite ed Broker or	e 1010, San l Dealer	Francisco, C	A 94111								
					~ 11								
State		erson Listed l											
	(Check "All	States" or checl	k individual St	ates)] All Sta	ites
[AL]		[AZ]	[AR]	X [CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[II]	•
[IL] [MT]	[IN] [NE]	[IA] [NV]	(KS) [NH]	[KY] [NJ]	[LA] [NM]	[ME] [NY]	[MD] [NC]	[MA] [ND]	[MI] [OH]	[MN] [OK]	[MS] [OR]	[M [Pa	-
[RI]	[SC]	[SD]	[TN]	[TX]	[บา]	[VT]	[VA]	[WA]	[wvj	[wɪj	[wy]	ĮΡΙ	
Full l	Name (Last i	ame first, if i	ndividual)										
Busir	ness or Resid	ence Address	(Number an	d Street, City	, State, Zi _l	p Code)						• •	
Name	e of Associa	ed Broker or	Dealer										
State	s in Which P	erson Listed I	Has Solicited	or Intends to	Solicit Pu	ırchasers		.					
	(Check "All	States" or checl	k individual St	ates)	***************************************] All St	ates
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[1])]
[IL] [MT]	[IN] [NE]	[IA] [NV]	[KS] [NH]	[KY] [NJ]	[LA] [NM]	[ME] [NY]	[MD] [NC]	[MA] [ND]	[MI] [OH]	[MN] [OK]	[MS] [OR]	[M [P/	•
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PI	-
Full i	Name (Last i	ame first, if i	ndividual)										
Busir	ess or Resid	ence Address	(Number and	d Street, City	, State, Zip	p Code)							
Name	of Associat	ed Broker or	Dealer							<u> </u>			
State	s in Which P	erson Listed I	las Solicited	or Intends to	Solicit Pu	ırchasers							
	(Check "All	States" or check	c individual St	ates)			•••••					All St	ates
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID	-
[IL] [MT]	[IN] [NE]	[IA] [NV]	[KS] [NH]	[KY] [NJ]	[LA] [NM]	[ME] [NY]	[MD] [NC]	[MA] [ND]	[MI] [OH]	[MN] [OK]	[MS] [OR]	[M] [P/	
[RI]	[SC]	[SD]	[TN]	[TX] nk sheet, or o	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PF	

OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS C. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\square\) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Aggregate Amount Already Offering Price Sold Type of Security Debt...... Equity..... \$32,000,000 2,540,000 □ Common □ ☐ Preferred Convertible Securities (including warrants) Partnership Interests Other (Specify ______) Total \$32,000,000 2,540,000 Answer also in Appendix, Column 3, if filing under ULOE. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Number Aggregate Investors Dollar Amount of Purchases Accredited Investors..... 2,540,000 Non-accredited Investors.... Total (for filings under Rule 504 only) Answer also in Appendix, Column 4, if filing under ULOE. 3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1. Type of Dollar Amount Type of offering Sold Security Rule 505 Regulation A Rule 504..... Total a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees ___1,000 ⊠\$ Printing and Engraving Costs..... □s **⊠S** 25,000 Legal Fees Accounting Fees..... **□**\$ __ Engineering Fees..... **⊠\$** __14,000 Sales Commissions (specify finders' fees separately)..... □s_____ Other Expenses (identify) Finders' Fees **⊠\$** 1,000,000 Total □\$<u>1,040,000</u>

	21.1 Live to respirit erior number of this fors expenses induse of	PROGREDS		
	b. Enter the difference between the aggregate offering price given in response to Part C — Question 1 and total expenses furnished in response to Part C — Question 4.a. This difference is the "adjusted gross proceeds to the issuer."	5	s_30,	960,000
5.	Indicate below the amount of the adjusted gross proceed to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C — Question 4.b above.	1		
		Payments to		
		Officers, Directors, & Affiliates	Payme Othe	
	Salaries and fees	X \$ 410,00	0□ s	0_
	Purchase of real estate			
	Purchase, rental or leasing and installation of machinery		-	
	and equipment			
	Construction or leasing of plant buildings and facilities		29 S 1 2	<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	₽	п \$	0
	Repayment of indebtedness		—	
	Working capital			
	Other (specify):		-	
	non-		s	
	Column Totals	X s 410,00	0 <u>xs_30</u>	,500,000
	Total Payments Listed (column totals added)		0,960,	
77	RD PEDERATISIGNATURE			
sig	e issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice nature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commit information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of	ission, upon writter	le 505, the fe n request of	ollowing its staff,
İssı	uer (Print or Type) Gold Resource Corp	Date	40 =	
Na	me of Signer (Print or Type) Title of Signer (Print or Type)	11/21,	/ 0 7	
	William Reid President			
	niiiiam ketu President			

— ATTENTION —

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	DESCAUE SIGNATURE		
1.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	Yes	No [2]
	See Appendix, Column 5, for state response.		
2.	The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is D (17 CFR 239.500) at such times as required by state law.	filed a no	otice on Form
3.	The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, informatissuer to offerees.	tion furi	nished by the
4.	The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be er limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer cla of this exemption has the burden of establishing that these conditions have been satisfied.	titled to iming th	the Uniform e availability
	er has read this notification and knows the contents to be true and has duly caused this notice to be signed on its beh horized person.	ilf by the	undersigned
Issuer (J	Print or Type) Signature Date		
Gold	Resource Corp. 11/21	/07	
Name (F	rint or Type) Title (Print or Type)	1	·····

President

Instruction:

William Reid

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

1		2	3		5				
	to non-a	d to sell accredited is in State I-Item I)		Type of investor and amount purchased in State (Part C-Item 2)				Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount (\$)	Number of Non-Accredited Investors	Amount	Yes	No
AL	· · · · · · · · · · · · · · · · · · ·				• •				
AK		·							
AZ .									
AR									
CA		Х	Common	1	40,000				X
со		Х	Common	4	250,000				X
СТ	,								
DE									
DC									
FL		Х	Common	3	580,000				X
GA									
НЈ									
ID									
łL									
IN	<u>-</u> .	**							
ΙΑ									
KS			······································						
KY	-						-		
LA									
ME									
MD									
MA					····				
MI									
MN									
MS									
МО		l							1

APPENDIX

1	2 3				5					
	to non-	d to sell accredited rs in State 3-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)				(if yes, explana waiver p	under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount (\$)	Number of Non-Accredited Investors	Amount	Yes	No	
МТ					, ,					
NE										
NV		Х	Common	1	440,000				Х	
NH							·			
NJ										
NM		Х	Common	1	200,000				Х	
NY		Х	Common	l	40,000				х	
NC		х	Common	2	240,000		_		Х	
ND										
ОН		X	Common	1	100,000				X	
ок										
OR										
PA		х	Common	2	80,000		<u> </u>		x	
RI			 -							
sc										
SD										
TN										
TX	-	Х	Common	4	570,000			-	X	
UT					<u>-</u>					
VΤ					_					
VA									<u> </u>	
WA		_							 	
WV										
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WY								<u> </u>		
PR					,					

